



03-16-01

.PTO/SB/05 (12/97)

Approved for use through 09/30/00. OMB 0651-0032

Please type a plus sign (+) inside this box → +

Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE  
Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number

**UTILITY  
PATENT APPLICATION  
TRANSMITTAL**

(Only for new nonprovisional applications under 37 CFR 1.53(b))

Attorney Docket No.	044502.0017
First Named Inventor or Application Identifier	Troy Squires
Title	Horizontally Draining, Pre-Engineered Synthetic Turf Field
Express Mail Label No.	EL 704727504 US

**APPLICATION ELEMENTS**

See MPEP Chapter 600 concerning utility patent application contents

1.  \*Fee Transmittal Form (e.g., PTO/SB/17)  
(Submit an original, and a duplicate for fee processing)

2.  Specification  
(preferred arrangement set forth below)  
 - Descriptive title of the Invention  
 - Cross References to Related Applications  
 - Statement Regarding Fed sponsored R&D  
 - Reference to Microfiche Appendix  
 - Background of the Invention  
 - Brief Summary of the Invention  
 - Brief Description of the Drawings (if filed)  
 - Detailed Description  
 - Claim(s) - INCLUDED  
 - Abstract of the Disclosure - INCLUDED

3.  Drawing(s) (35 USC d113) [Total Sheets 2]

4. Oath or Declaration  
(including Supplemental Declaration) [Total Pages 3]

- a.  Executed (original or copy)  
b.  Copy from a prior application (37 CFR §1.63(d))  
(for continuation/divisional with Box 17 completed)

**[Note Box 5 below]**

- i.  **DELETION OF INVENTOR(S)**  
Signed statement attached deleting inventor(s)  
named in the prior application,  
see 37 CFR§1.63(d)(2) and 1.33(b).

5.  Incorporation By Reference (useable if Box 4b is checked)  
The entire disclosure of the prior application, from which a copy of  
the oath or declaration is supplied under Box 4b, is considered as  
being part of the disclosure of the accompanying application and is  
hereby incorporated by reference therein.

**17. If a CONTINUING APPLICATION, check appropriate box and supply the requisite information below and in a preliminary amendment:**

- Continuation     Divisional     Continuation-in-part (CIP)    of US Patent Application No:

**Prior application information: Anticipated Examiner:****18. CORRESPONDENCE ADDRESS** Customer Number or Bar Code Label

(Insert Customer No. or Attach bar code label here)

or  Correspondence address below

020790

NAME	Russell C. Scott Akin, Gump, Strauss, Hauer & Feld, L.L.P.		
ADDRESS	816 Congress Avenue, Suite 1900		
CITY	Austin	STATE	Texas
COUNTRY	U.S.A.	TELEPHONE	(512) 499-6200
ZIP CODE	78701		
FAX	(512) 499-6290		

Name (Print/Type)	Russell C. Scott	Registration No. (Attorney/Agent)	43,103
Signature	Russell C. Scott		DATE 03/14/01

**Burden Hour Statement:** This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Box Patent Application, Washington, DC 20231.

**FEET TRANSMITTAL**

Patent fees are subject to annual revision on October 1.

These are the fees effective October 1, 1997.

Small Entity payments must be supported by a small entity statement, otherwise large entity fees must be paid. See Forms PTO/SB/09-12.

TOTAL AMOUNT OF PAYMENT

(\$750.00)

**Complete If Known**

Application Number	Not yet assigned
Filing Date	March 14, 2001
First Named Inventor	Tracy Squires
Anticipated Examiner Name	
Anticipated Group / Art Unit	

Attorney Docket No. 044502.0017

**METHOD OF PAYMENT**

1.  The Commissioner is hereby authorized to charge to the following Deposit Account,

Deposit Account Number 01-0660

Deposit Account Name Akin Gump Strauss Hauer &amp; Feld

- Charge any additional fee required or credit any overpayment  Charge all indicated fees and any additional fee required or credit any overpayment

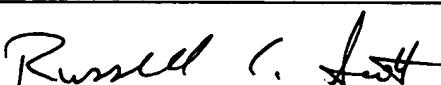
2.  Payment Enclosed:

 Check  Money Order  Other
**FEE CALCULATION (continued)****3. ADDITIONAL FEES**

Large Fee Code	Entity Fee (\$)	Small Fee Code	Entity Fee (\$)	Fee Description	Fee Paid
105	130	205	65	Surcharge - late filing fee	
127	50	227	25	Surcharge - late provisional filing fee or cover sheet.	
139	130	139	130	Non-English specification	
147	2,520	147	2,520	For filing a request for reexamination	
112	920*	112	920*	Requesting publication of SIR prior to Examiner action	
113	1,840*	113	1,840*	Requesting publication of SIR after Examiner action	
115	110	215	55	Extension for reply within first month	
116	400	216	200	Extension of time within second month	
117	950	217	475	Extension of time within third month	
118	1,510	218	755	Extension of time within fourth month	
128	2,060	228	1,030	Extension of time within fifth month	
119	310	219	155	Notice of Appeal	
120	310	220	155	Filing a brief in support of an appeal	
121	270	221	135	Request for oral hearing	
138	1,510	138	1,510	Petition to institute a public use proceeding	
140	110	240	55	Petition to revive - unavoidable	
141	1,320	241	660	Petition to revive - unintentional	
142	1,320	242	660	Utility issue fee (or reissue)	
143	450	243	225	Design issue fee	
144	670	244	335	Plant issue fee	
122	130	122	130	Petitions to the Commissioner	
123	50	123	50	Petitions related to provisional applications	
126	240	126	240	Submission of Information Disclosure Stmt.	
581	40	581	40	Recording each patent assignment per property (time number of properties)	
146	790	246	395	Filing a submission after final rejection (37 CFR 1.129(a))	
149	790	249	395	For each additional invention to be examined (37 CFR 1.129(b))	
Other fee (specify) _____					
Other fee (specify) _____					
*Reduced by Basic Filing Fee Paid					
SUBTOTAL (3) (\$40.00)					

**SUBMITTED BY**

Typed or Printed Name Russell C. Scott

Signature 

Complete (if applicable)

Reg. Number 43,103

Deposit Account User ID 01-0660

Date 03/14/01

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231